PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

Application or Docket Number

1DS-14502/14

CLAIMS AS FILED - PART I						SMALL ENTITY			VTITY		OTHER THAN		
TOTAL CLAIMS			(Column 1)		(Column 2)		n .	TYPE		OR	SMALL	SMALL ENTITY	
			7					RATE	FEE		RATE	FEE	
FC	R		NUMBER FILED		NUMBER EXTRA			BASIC FEE	355.00	OR	BASIC FEE	· 710.00	
ТС	TAL CHARGEA	BLE CLAIMS	フ minus 20=		. 0			X\$ 9=		OR	X\$18=		
	EPENDENT CL		/ minus 3 =		. 0			X40=		OR	X80=		
MULTIPLE DEPENDENT CLAIM PRESENT					- /2			+135=		OR	+270=		
* If the difference in column 1 is less than zero, enter					"0" in c	olumn 2	ŧ	TOTAL	355	OR	TOTAL		
	C	LAIMS AS A	MENDED - PART II								THAN		
(Column 1)				(Column 2) (Column 3))	SMALL	YTITM	OR	SMALL	ll ll	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT	, ,	HIGH NUME PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=		
ARM	Independent FIRST PRESE	* NTATION OF MI	Minus JLTIPLE DEF	PENDENT	CLAIM	=		X40=		OR	X80=		
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								+135=		OR	+270=		
BEST AVAILABLE COPY						Ę	TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE			
(Column 1) (Column 2) (Column 3)								40011. FEE (,	AUDII. FEEL		
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUMI PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=		
AME	Independent	*	Minus	***		=		X40=		OR	X80=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						╛╏						
								+135=		OR	+270=	100	
								TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE		
		(Column 1)	Y	(Colur		(Column 3))						
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUMI PREVIC PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**	-	=		X\$ 9=		OR	X\$18=		
	Independent	NTATION OF ME	Minus	***		<u> </u> =	╽╏	X40=		OR	X80=		
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM													
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.								ginnige somewhat	OR	+270=			
•••	If the "Highest Nur If the "Highest Nu	mber Previously Pa mber Previously Pa	iid For" IN THIS aid For" IN THIS	S SPACE is S SPACE is	s less tha	n 20, enter "20 n 3, enter "3."	_	TOTAL DDIT. FEE	فسيم ومناها ومستعد		TOTAL ADDIT. FEE	- 12	
***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.													

PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

Application or Docket Number 09/779782

		CLAIMS AS	• Column)		(Column 2)			SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY		
TC	TAL CLAIMS		7				Ė	RATE	FEE	1 1	RATE	FEE	
FO	R		/ NUMBER FILED		NUMBER EXTRA		E	BASIC FEE	355.00	OR	BASIC FEE	710.00	
TO	TAL CHARGEA	BLE CLAIMS	7 minus 20=		. 0		ľ	X\$ 9=	1	OR	X\$18=		
IND	EPENDENT CL	AIMS	/ minus 3 =		* 8			X40=		OR	X80=		
MU	LTIPLE DEPEN	IDENT CLAIM PI	RESENT				İ	+135=		OR	+270=		
* If the difference in column 1 is less than zero, enter						olumn 2	L	TOTAL	355	OR	TOTAL		
CLAIMS AS AMENDED - PART II											OTHER	THAN	
(Column 1) (Column 2) CLAIMS HIGHEST						(Column 3)	_	SMALL E	NTITY	OR	SMALL	ENTITY	
AMENDMENT A	p. ¹	CLAIMS REMAINING AFTER AMENDMENT		NUM PREVI	IBER	PRESENT EXTRA		RATE	ADDI- TIONAL FEE	1	RATE	ADDI- TIONAL FEE	
	Total	· B	Minus	** 0	20	=		X\$ 9=	/	OR	X\$18=		
	Independent	· #	Minus		3.	=		X40=		OR	X80=		
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								+135=		OR	+270=		
BEST AVAILABLE COPY							L	TOTAL			TOTAL		
(Column 1) (Column 2) (Column 3)							Al	DDIT. FEE			ADDIT. FEE	L V	
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVI	HEST MBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
MON	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=		
ME	Independent	*	Minus	***		=		X40=		OR	X80=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							105			070		
								+135= TOTAL		OR	+270= TOTAL		
								DDIT. FEE	-	OR	ADDIT. FEE		
_	•	(Column 1)	1		mn 2) HEST	(Column 3)	_			ı <u>1</u>			
AMENDMENT C		REMAINING AFTER AMENDMENT	g×a a	NUM PREVI	IBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		= '		X\$ 9=		OR	X\$18=		
	Independent	Minus *** NTATION OF MULTIPLE DEPENDENT (=	T	X40=		OR	X80=			
Ĺ	FIRST PRESE	:NTATION OF MI	ULTIPLE DE	LIPLE DEPENDENT CLAIM			+135:				+270=		
		mn 1 is less than th					L	TOTAL		OR	+270= TOTAL		
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.													